## CEDAR PARK, TX — PROPOSED FILMING PERMIT NOTIFICATION AND SIGNOFF REQUEST

Cedar Park, Texas requires that all property owners / residents whose property is adjacent to the area sought to be closed must be notified and provided with a map of the area, which indicates all obstructions to be placed in the closure area. The notification must indicate by signature, whether the property owner / resident approves or disapproves of the proposed closure.

Film Company's Contact Name)	(Phone Number)	
	is applying for a FILMING PERMIT for the followin	ng film:
Company Name)		
Name of Film)		
he filming is scheduled for the following da	es and times:	
he filming will close or partially close the fo	owing streets:	
he filming will consist of the following:		
determine whether or not the filming activi	s this information is used by Cedar Park, Texas to ies indicated above will be approved or denied.	
Please fill out the this section completely a	ies indicated above will be approved or denied.	
Please fill out the this section completely a determine whether or not the filming activities.	ies indicated above will be approved or denied.	
Please fill out the this section completely a determine whether or not the filming activi  O APPROVE O DISAPPROVE	ies indicated above will be approved or denied.  RECEIVED MAP: O YES O NO	
Please fill out the this section completely a determine whether or not the filming activity.  O APPROVE O DISAPPROVE  (Print Name and Title)  (Print Address)  O RESIDENCE O BUSINESS	ies indicated above will be approved or denied.  RECEIVED MAP: O YES O NO  (Signature)  (Phone Number)  (Choose One)	
Please fill out the this section completely a determine whether or not the filming activi  O APPROVE O DISAPPROVE  (Print Name and Title)  (Print Address)	ies indicated above will be approved or denied.  RECEIVED MAP: O YES O NO  (Signature)  (Phone Number)  (Choose One)	
Please fill out the this section completely a determine whether or not the filming activity.  O APPROVE O DISAPPROVE  (Print Name and Title)  (Print Address)  O RESIDENCE O BUSINESS	ies indicated above will be approved or denied.  RECEIVED MAP: O YES O NO  (Signature)  (Phone Number)  (Choose One)	